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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/913,362	05/01/2002	Yasunori Matsukawa	MAT-8172US	9677

7590                      03/10/2004  
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EXAMINER

PATIDAR, JAY M

ART UNIT                      PAPER NUMBER

2862

DATE MAILED: 03/10/2004

Please find below and/or attached an Office communication concerning this application or proceeding.

<b>Interview Summary</b>	<b>Application No.</b> 09/913,362	<b>Applicant(s)</b> MATSUKAWA ET AL.	
	<b>Examiner</b> Jay M. Patidar	<b>Art Unit</b> 2862	

All participants (applicant, applicant's representative, PTO personnel):

- (1) Jay M. Patidar. (3) \_\_\_\_\_  
 (2) Mr. Lawrence Ashery. (4) \_\_\_\_\_

Date of Interview: 26 February 2004.

Type: a)  Telephonic b)  Video Conference  
 c)  Personal [copy given to: 1)  applicant 2)  applicant's representative]

Exhibit shown or demonstration conducted: d)  Yes e)  No.  
 If Yes, brief description: \_\_\_\_\_.

Claim(s) discussed: 1 and 11.

Identification of prior art discussed: Baba et al.

Agreement with respect to the claims f)  was reached. g)  was not reached. h)  N/A.

Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments: The language of the claim is discussed over Baba et al. to overcome 103 rejection of the previous office action.

(A fuller description, if necessary, and a copy of the amendments which the examiner agreed would render the claims allowable, if available, must be attached. Also, where no copy of the amendments that would render the claims allowable is available, a summary thereof must be attached.)

THE FORMAL WRITTEN REPLY TO THE LAST OFFICE ACTION MUST INCLUDE THE SUBSTANCE OF THE INTERVIEW. (See MPEP Section 713.04). If a reply to the last Office action has already been filed, APPLICANT IS GIVEN ONE MONTH FROM THIS INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW SUMMARY FORM, WHICHEVER IS LATER, TO FILE A STATEMENT OF THE SUBSTANCE OF THE INTERVIEW. See Summary of Record of Interview requirements on reverse side or on attached sheet.

Examiner Note: You must sign this form unless it is an Attachment to a signed Office action.

  
 \_\_\_\_\_  
 Examiner's signature, if required